FORM D

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



FORM D

EXECUTED

NOTICE OF SALE OF SECURITIES NAL PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION OMB APPROVAL

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per form......16



Name of Offering (☐ check if this is an amendmen	t and name has changed, a	and indicate change.	)	
Purchase of Limited Partnership Interests in Tri	nity IX Entrepreneurs'	Fund, L.P. (the "Pa	rtnership")	
Filing Under (Check box(es) that apply):	Rule 504	Rule 505	☑ Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing:		New Filing		Amendment
/	A. BASIC I	DENTIFICATION	DATA	
1. Enter the information requested about the issue	r	( ) ·		
Name of Issuer ( check if this is an amendment a	nd name has changed, and	d indicate change.)		
Trinity IX Entrepreneurs' Fund, L.P.				
Address of Executive Offices	(Number and Street	, City, State, Zip Co	de) Telephone Numb	per (Including Area Code)
c/o Trinity Ventures, 3000 Sand Hill Road, Build	ing 4, Suite 160, Memo l	Park, California 94	025 (650) 854-9500	
Address of Principal Business Operations (Number (if different from Executive Offices)	and Street, City, State, Zi	p Code)	Telephone Numb	per (Including Area Code)
Brief Description of Business				
Venture capital investment partnership				PHULESSED
Type of Business Organization				20.4
□ corporation	ted partnership, already	formed	other:	JUL 2 4 2005
□ business trust □ limit	ed partnership, to be forn	ned		- , 4600
		<u>Month</u>	<u>Year</u>	THUMSON
Actual or Estimated Date of Incorporation or Organ	ization:	01	2006	PINANCIAL
Jurisdiction of Incorporation or Organization: (E	Inter two-letter U.S. Posta	al Service abbreviation	on for State	■ Actual □ Estimated
	N for Canada; FN for oth			DE

## GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

#### Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Boxes ☐ Executive Officer ☐ Director General Partner of the ☐ Promoter ☐ Beneficial Owner that Apply: Partnership (the "General Partner") Full Name (Last name first, if individual) Trinity TVL IX, LLC Business or Residence Address (Number and Street, City, State, Zip Code) c/o Trinity Ventures, 3000 Sand Hill Road, Building 4, Suite 160, Menlo Park, California 94025 Check ☐ Executive Officer ☐ Director Management Member of ☐ Promoter ☐ Beneficial Owner Box(es) that the General Partner Apply: Full Name (Last name first, if individual) Lawrence K. Orr Business or Residence Address (Number and Street, City, State, Zip Code) c/o Trinity Ventures, 3000 Sand Hill Road, Building 4, Suite 160, Menlo Park, California 94025 Check ☐ Director ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Management Member of Box(es) that the General Partner Apply: Full Name (Last name first, if individual) Noel J. Fenton Business or Residence Address (Number and Street, City, State, Zip Code) c/o Trinity Ventures, 3000 Sand Hill Road, Building 4, Suite 160, Menlo Park, California 94025 Check Boxes ☐ Director Management Member of ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer that Apply: the General Partner Full Name (Last name first, if individual) Augustus O. Tai Business or Residence Address (Number and Street, City, State, Zip Code) c/o Trinity Ventures, 3000 Sand Hill Road, Building 4, Suite 160, Menlo Park, California 94025 Check Boxes ☐ Promoter ☐ Executive Officer ☐ Director ☐ Beneficial Owner Management Member of that Apply: the General Partner Full Name (Last name first, if individual) Fred Wang Business or Residence Address (Number and Street, City, State, Zip Code) c/o Trinity Ventures, 3000 Sand Hill Road, Building 4, Suite 160, Menlo Park, California 94025 Check Boxes Management Member of ☐ Promoter ☐ Beneficial Owner ☐.Executive Officer ☐ Director that Apply: the General Partner Full Name (Last name first, if individual) Kathleen A. Murphy Business or Residence Address (Number and Street, City, State, Zip Code) c/o Trinity Ventures, 3000 Sand Hill Road, Building 4, Suite 160, Menlo Park, California 94025 Check Boxes ☐ Director ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Management Member of that Apply: the General Partner Full Name (Last name first, if individual) Timothy P. McAdam Business or Residence Address (Number and Street, City, State, Zip Code) c/o Trinity Ventures, 3000 Sand Hill Road, Building 4, Suite 160, Menlo Park, California 94025 Check Box(es) Director ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer Management Member of that Apply: the General Partner Full Name (Last name first, if individual) Thomas C. Cole Business or Residence Address (Number and Street, City, State, Zip Code) c/o Trinity Ventures, 3000 Sand Hill Road, Building 4, Suite 160, Menlo Park, California 94025 Check Box(es) ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ Other that Apply: Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

A. BASIC IDENTIFICATION DATA

Enter the information requested for the following:

	7			В	. INFORM	ATION AB	OUT OFFE	RING				
1.	Has the issuer sold,	or does the issu	er intend to				_	under ULOE			Yes N	0 <u>X</u>
2.	What is the minimu	m investment t	hat will be a	ocepted from	n any indivi	dual?					N/A	
3.	Does the offering p	ermit joint own	ership of a si	ingle unit?	,				•••••	,	Yes <u>X</u> N	o
4.	Enter the information of purchasers in corn SEC and/or with a syou may set forth the	nnection with sa state or states, li	iles of securi	ties in the o	ffering. If a r or dealer.	person to be	listed is an	associated pe	rson or agent o	of a broker or	dealer regis	tered with the
					N	OT APPLIC	CABLE					
Full	Name (Last name fi	rst, if individua	1)									
D	: D:4 A	11 Ol		City Photo	7:- 0- 1-)							
Bus	iness or Residence A	ddress (Numbe	r and Street,	City, State,	Zip Code)							
Nar	ne of Associated Bro	ker or Dealer										
Stat	es in Which Person I	isted Has Solid	ited or Inten	ds to Solici	t Purchasers					<del></del>		· · · · · · · · · · · · · · · · · · ·
(Ch	eck "All States" or cl	heck individual	States)						· · · · · · · · · · · · · · · · · · ·			All States
[AL	.] [AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]	rj [NE]	[NV]	INHI	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SD]	[TN]	[TX]	[UT]	{VT}	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last name fi	rst, if individua	l)								÷	
Bus	iness or Residence A	ddress (Numbe	r and Street,	City, State,	Zip Code)							
Nar	ne of Associated Bro	ker or Dealer										
Stat	tes in Which Person I	isted Has Solid	cited or Inten	ds to Solicit	t Purchasers							
(Ch	eck "All States" or cl	heck individual								***************************************		All States
[AL	.] [AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[M]	rj [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	·	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last name fi	rst, if individua	l)									
Bus	iness or Residence A	.ddress (Numbe	r and Street.	City. State.	Zin Code)							
				,,,	,							
Nan	ne of Associated Bro	ker or Dealer										
			<del></del>								•	
	es in Which Person I											
	eck "All States" or cl											All States
[AL		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
M	ΓI [NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	ND	[OH]	[OK]	[OR]	[PA]

[NY]

[VT]

[VA]

INDI

[VA]

[OH]

[WV]

[OK]

[WI]

[OR]

[WY]

[PA]

[PR]

[SD]

[SC]

[RI]

[TN]

[TX]

[UT]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zoo." If the transaction is an exchange offering, check this box \( \Pi \) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Type of Security Aggregate Amount Already Offering Price Sold Debt ..... Equity ..... Common ☐ Preferred Convertible Securities (including warrants) Partnership Interests ..... \$4,110,000.00 \$4,110,000.00 Other (Specify \_\_\_\_\_\_) Total..... \$4,110,000.00 \$4,110,000.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases \$4,110,000.00 Accredited Investors..... Non-accredited Investors..... \$0.00 Total (for filings under Rule 504 only) ..... Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Type of Dollar Amount Security Sold Type of Offering Rule 505..... Regulation A Rule 504..... Total..... a. Furnish a statement of all expenses inconnection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. Transfer Agent's Fees Printing and Engraving Costs.... Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) 

Other Expenses (Specify).....

Total.....

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND	USE OF PROCEEDS	
b. Enter the difference between the aggregate offering price given in response to Part C - Question furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to	1 and total expenses o the issuer"	\$4,110,000.00
5. Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Quest	e. The total of the	Payment To Others
Salaries and fees	□ \$	□ <b>\$</b>
Purchase of real estate	□ \$	<b>S</b>
Purchase, rental or leasing and installation of machinery and equipment	<b>\$</b>	□ <b>\$</b>
Construction or leasing of plant buildings and facilities	□ s	□ <b>\$</b>
Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	<b>\$</b>	□ \$
Repayment of indebtedness	□ \$	□ \$
Working capital (a portion of the Working capital will be used to pay various fees and expenses over the life of the Partnership, payable to Trinity TVL IX, LLC, which serves as the sole General Partner of the Partnership.	<b>\$</b>	<b>×</b> \$4,110,000.00
Other (specify):	□ s	□ \$
	□ \$	□ \$
Column Totals		
Total Payments Listed (column totals added)	\$4,110,00	-
	— 3 <u>.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
D. FEDERAL SIGNATURE	. <u></u> .	
The issuer had duly caused this notice to be signed by the undersigned duly authorized person. If this notice is an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request conon-accredited investor pursuant to paragraph (b)(2) of Rule 502.	filed under Rule 505, the fol of its staff, the information for	llowing signature constitutes urnished by the issuer to any
Issuer (Print or Type) Signature		Date
Trinity IX Entrepreneurs' Fund, L.P.	<del></del> .	July 2006
Name of Signer (Print or Type)  Title of Signer (Print or Type)		
Kathy Murphy  A Management Member of T Partner of Trinity IX Entrept		serves as the sole General

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

 		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262 presently subject to any	of the disqualification provisions of such rule?	Yes	No 🗷				
	See Appe	endix, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to furnish to the state ad times as required by state law.	Iministrator of any state in which the notice is filed, a notice on Form D (17	CFR 239.50	0) at such				
3.	The undersigned issuer hereby undertakes to furnish to any state ac	dministrators, upon written request, information furnished by the issuer to of	fferees.					
4.								
	ne issuer has read this notification and knows the contents to be true arrson.	nd has duly caused this notice to be signed on its behalf by the undersigned	duly authori	ized				
Issu	suer (Print or Type)	Signature / Date	: 2					
Tri	rinity IX Entrepreneurs' Fund, L.P.	Kan July	, 2006					
Nai	ame (Print or Type)	Title (Print or Type)						
Ka	athy Murphy	A Management Member of Trinity TVL IX, LLC which serves as the Partner of Trinity IX Entrepreneurs' Fund, L.P.	he sole Gen	eral				

#### Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				APPENDIX					
1		2 3						5	
	to non- investo	nd to sell accredited ors in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No No
AL									,
AK									
AZ									
AR									
CA		X	\$3,435,000	28	\$3,435,000	0	\$0.00		X
СО									
СТ									
DE									
DC									
FL									1
GA									<u> </u>
НІ									
1D									
IL									
IN									
IA	,								
KS									
KY									
LA									
MA									
MD									
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MN									
MS									
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				APPENDIX							
1		2	3		4				5		
	to non- investo	nd to sell accredited rs in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E- Item 1)		
State	Yes	No	Limited Partnership Interests	Number of Accredited Investors	Accredited Non-		Yes	No			
MT						THI VESTOLS			·		
NE											
NV	<u> </u>	X	\$100,000	1	\$100,000	0	\$0.00		X		
NH											
NJ											
NM	<del>.</del>								-		
NY											
NC											
ND											
ОН									1		
ОК							1				
OR											
PA											
RI											
SC											
SD											
TN											
TX											
UT									<u> </u>		
VT								<del>                                     </del>	-		
VA									-		
WA		X	\$575,000	4	\$575,000	0	\$0.00		X		
wv								<u> </u>	<del> </del>		
WI											
WY											
PR											
		i	I	I	I	1	1	1	1		